

METER WATER SERVICES – PERMITS SECTION
REQUEST FOR SET METER/SERVICE PERMITS
MWS PERMITS FAX: (615)862-7257

Date: _____

TYPE OF REQUEST:

SEWER APPROVAL _____
WATER APPROVAL _____
SET METER PERMIT _____

PAYMENT TYPE:

CHECK/CASH/CC: _____
TRANSFER SLIP _____
DEVELOPERS EQUITY _____

CODES BUILDING PERMIT NUMBER: _____

SERVICE ADDRESS PROPERTY INFORMATION:

Street address	City	Zip
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Property description, full name of subdivision, i.e. name, phase, section, revision plus lot number

Map/Parcel number: _____

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Party responsible for bill: _____

Address: _____

Contact person: _____ Phone #: _____

Contractor/Plumber: _____

Address: _____

Contact person: _____ Phone #: _____

Contractor/Plumber number (JC,PC, GC): _____

Commercial: _____ **Residential:** _____ **New** _____ **Existing** _____

Hazard Status of Business: _____ **High** _____ **Low**

Type of Meter & Number of Backflow Devices: Domestic _____ Irrigation _____ Fire Service _____

Change Meter _____ Current Meter Number _____ Reading _____

Other (Meter Deduct, Cooling Tower, Blow Down, FS Flushing) _____

***Meters will be inspected 15 working days after permit is issued. Inspection fees will be charged for all meter inspections.**

Permits Staff use only:

Has a PRV or booster pump been recommended? Yes _____ No _____